**Impacts of Illegal Immigration: Diseases**

Legal immigrants are required to have medical screening to ensure that they do not bring any contagious diseases into the United States. Illegal aliens are not screened and many are carrying horrific third world diseases that do not belong in the USA. Many of these diseases are highly contagious and will infect citizens that come in contact with an infected illegal alien. This has already happened in restaurants, schools, and police forces.

[**Malaria**](http://gsbs.utmb.edu/microbook/ch083.htm) was eradicated from the USA in the 1940s but recently there were outbreaks in southern California, New Jersey, New York City, and Houston. Additionally, Malaria tainted blood has been discovered in the blood supply.

[**Dengue**](http://www.dhpe.org/infect/dengue.html) was first recognized in the 1950s, affects most Asian countries and has become a leading cause of death among children in the infected areas. Heretofore unknown in the US, Dengue outbreaks have now occurred in the United States.

[**Leprosy**](http://edcp.org/factsheets/leprosy.html), a scourge of Biblical days, is caused by a bacillus agent and is now know as Hansen's Disease. In the 40 years prior to 2002, there were only 900 total cases of leprosy in the US. In the following three years there have been [9,000 cases](http://worldnetdaily.com/news/article.asp?ARTICLE_ID=44394) and most were illegal aliens.

As noted in the article [*Leprosy in America: new cause for concern*](http://jscms.jrn.columbia.edu/cns/2005-03-15/whitford-americanleprosy) by Dr. William Levis, head of the New York Hansen's Disease Clinic. "It's creeping into the U.S. ... This is a real phenomenon. **It's a public health threat. New York is endemic now, and nobody's noticed.**" In the same article, Dr. Terry Williams, who runs a Houston-based clinic serving leprosy patients across southern Texas, said that **the bulk of the cases treated by his clinic were immigrants.** "A lot of our cases are imported," he said. "We see patients from everywhere--Africa, the Philippines, China, South America." (emphasis added)

[**Hepatitis A-E**](http://www.cdc.gov/ncidod/diseases/hepatitis/index.htm) is a viral infection that primarily attacks the liver. In 2004, more than 650 people contacted Hepatitis A at a single Chi-Chi's Mexican restaurant in Pennsylvania. Four latter died. Hepatitis B is one of the major diseases of mankind and is a serious global public health problem. It is estimated that 2 BILLION people are infected and about one million persons die each year. The new vaccine is only 95% effective in preventing an infection and will not cure a person who already has Hepatitis B, which results in a lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, and early death. An estimated 1.3 million people in the US are currently infected. No vaccine is currently available to prevent Hepatitis C-E and treatment for chronic Hepatitis C costs about $1,500 per person.

[**Tuberculosis**](http://en.wikipedia.org/wiki/Tuberculosis)(TB) kills approximately 2 million people each year. It is estimated that between 2002 and 2020, approximately 1,000,000,000 people will be newly infected, over 150 million people will get sick, and 36 million will die. TB is a highly contagious disease. Like the common cold, it spreads through the air. When infectious people cough, sneeze, talk or spit, they propel TB germs, known as bacilli, into the air. Each person with active TB will infect on average between 10 and 15 people every year.

The United States currently has one of the lowest rates of TB in the world. Mexico has 10 times the rate of prevalence and many African countries along with Afghanistan, Cambodia, the Philippines, and Indonesia have rates that are 100 – 150 times higher. Making matters worse, a few years ago a [Multi-Drug-Resistant (MDR) strain of TB has emerged](http://www.tiem.utk.edu/~gross/antibio.project/resistant.tuberculosis.txt) that is resistant to all standard anti-TB drugs. Treating a single case of MDR TB costs **over $250,000 and as much as** **$1,200,000** **per person**, and even with treatment about half of the patients with MDR-TB prematurely die.

In an article in the Journal of the American Medical Assn., [Dr. Reuben Granich](http://lungdiseases.about.com/od/tuberculos2/a/multidrugres_tb.htm), a lead investigator for the CDC [commented on MDR-TB](http://pubs.ama-assn.org/media/2005j/0607.dtl):

"Evidence of it has surfaced in 38 of 61 California health jurisdictions, and it could ‘threaten the efficacy of TB control efforts,' Granich said. The infected were said to be four times as likely to die from the disease and twice as likely to transmit the disease to others ... Reluctant to label the infected as ‘illegal' or even ‘undocumented' aliens, the report notes that of the 407 known cases of MDR-TB, 84% were ‘foreign-born' patients, mainly from Mexico and the Philippines who'd been in the U.S. less than five years. The percentage of TB cases among the ‘foreign-born' jumped from 29% in 1993 to 53% as of last year."

Recently, there was a [*TB Outbreak In Oklahoma City*](http://www.kten.com/Global/story.asp?S=5437569) in a hospital affecting thousands.

Hopefully, this will not be the new e**x**tensively **d**rug-**r**esistant [XDR strain](http://www.npr.org/templates/story/story.php?storyId=5298861) just being brought in by illegal aliens ([now 4% of US cases](http://www.who.int/mediacentre/news/notes/2006/np23/en/index.html)) and which is currently **impossible to cure** **at any cost**. In any case, it would not be surprising to find that the source of the outbreak is an illegal alien working in the hospital or an infected resident worker who became infected through contact with an infected illegal alien since the TB rate for residents in the USA is very low.

For more information on TB and the link to illegal aliens, see:

* [*Is CDC covering up skyrocketing TB rate?*](http://www.worldnetdaily.com/news/article.asp?ARTICLE_ID=43384)
* [*Immigration helps diseases spread in Valley*](http://brownsvilleherald.com/ts_comments.php?id=68170_0_10_0_C)
* [*Mayor favors tougher stance against illegals*](http://www.nwanews.com/adg/News/170908).

[**Chagas Disease**](http://www.cdc.gov/ncidod/dpd/parasites/chagasdisease/factsht_chagas_disease_blood_screening.htm) (American Trypanosomiasis), endemic to South and Central America, is spread by infected *triatomine bugs, known as the "kissing bugs,"* that bite people. It was unknown in the United States until fairly recently. It is now estimated that between 100,000 and [500,000](http://www.nlm.nih.gov/medlineplus/ency/article/001372.htm) people in the US have Chagas Disease. Who is infected? Mostly illegal aliens.

Since Chagas Disease is basically unknown outside of the illegal alien community most doctors won't recognize it and the blood supply just started being screened for it. Most cases of Chagas Disease that occur in patients other than illegal aliens are thought to be contracted from tainted blood – blood sold by illegal aliens with Chagas Disease before the blood supply started being tested for it as of August of 2006.

[**HIV**](http://www.latimes.com/news/local/la-me-hivimmig25feb25,1,2535284.story)The number of illegal Mexican and Central American immigrants with HIV or AIDS is unknown, mostly because researchers rarely ask about immigration status. However, it is known that the rate of HIV infection among Latino women in California is about twice the rate of white women. At one free California health clinic, all of the women have HIV or AIDS. Most are Mexican or Central American "immigrants."

Then there is [Schistosomiasis](http://www.tulane.edu/~dmsander/WWW/224/Schisto.html), [Guinea Worm Infection](http://www.dhpe.org/infect/guinea.html), [Whooping cough,](http://www.worldnetdaily.com/news/article.asp?ARTICLE_ID=44732) [Cysticercosis](http://www.worldnetdaily.com/news/article.asp?ARTICLE_ID=53761), [Morgellon's](http://www.worldnetdaily.com/news/article.asp?ARTICLE_ID=50254), and a host of others.

All these diseases and pathogens, and a plethora of others that are not endemic to the US, are being brought in by unscreened illegal aliens who then spread them to an unsuspecting population. These diseases will give you something to think about the next time you are eating at a restaurant with the grunt work being done by illegal aliens who didn't have medical screening before preparing and handling your food.

As recently reported in [*Hepatitis Risk for East Asians in New York*](http://www.nytimes.com/2006/05/11/nyregion/11hepatitis.html?ei=5094&en=7d7b0bfede1dcdb7&hp=&ex=1147320000&partner=homepage&pagewanted=print), among east Asian immigrants in New York City, one person in seven carries the Hepatitis B virus and that researchers at New York Univ. School of Medicine, found that 15% of east Asians in New York - as many as 100,000 people - are chronic hepatitis carriers, with the rate highest among immigrants from China. That infection rate is 35 times the rate found in the general population. The article did not mention how many of the infected people were illegal aliens but odds are the vast majority were.

Health reporter Bill Sardi [noted](http://www.lewrockwell.com/sardi/sardi30.html):

"Recently an outbreak of hepatitis traced to Chi-Chi's Mexican restaurant, in Pennsylvania was inexplicably traced to contaminated green onions, not the most obvious cause, undocumented food workers who harbored Hepatitis. For the most part, Hepatitis is a blood-borne, not a food-borne disease. The Hepatitis outbreak infected over 650 individuals, caused 9,000 Americans to undergo immune globulin shots, and killed 4 people.

If Americans found out restaurants can commonly infect their customers from food workers, it would be a serious blow to the restaurant industry. Better blame the green onions. Let's concede the onions, grown in Mexico, were contaminated from fecal material containing Hepatitis. Did all the green onions imported from Mexico end up in one single restaurant? There were no other outbreaks of Hepatitis anywhere elsewhere from green onions. There were 13 restaurant workers who had Hepatitis. They were the likely source of the transmitted infection.

While the unions resist mandatory Hepatitis screening and vaccination for food workers, the government mandates that newborn babies be jabbed with Hepatitis vaccines before they can leave the hospital. The logic in this defies understanding until one realizes that newborn babies of immigrant families can more easily acquire Hepatitis so all babies are given the vaccines."

As noted in a May 2006 article, [*Milford taking harsher stance against illegals than Framingham*](http://www.milforddailynews.com/localRegional/view.bg?articleid=91097), increased levels of TB are being noted and some municipalities are finally starting to take action to protect their citizens.

As unfortunate as it may be, the US can not bear the financial burden for treating the world's sick, ill, and infected populace, but the Govt. should be protecting American citizens from the diseases being brought in by illegal aliens.

How many more citizens will come down with Hepatitis, Leprosy, E-coli, or Chagas Disease from contact with an infected illegal alien before something is done? How many school children must get TB before our government takes action to protect them?

Remember the movie *Alien* and how the creature popped out of infected bodies? The Guinea Worm is a mini-version. Maybe your kids can take advantage of the experience on show & tell day.

If we screen legal aliens for contagious diseases, why are we allowing unscreened and contagious illegal aliens to roam the country infecting the citizenry?

Diseases - collateral damage from a "victimless crime" to save ten cents on a head of lettuce.